

Fill in this information to identify your case and this filing:

Debtor 1	<u>Melissa</u>	<u>Diane</u>	<u>McGhee</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western</u>		District of <u>Texas</u>
Case number	<u>24-11288</u>		

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1 20965 Mandrake Dr

Street address, if available, or other description

Pflugerville, TX 78660

City State ZIP Code

Travis

County

What is the property? Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Source of Value: Travis County Appraisal District

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?
\$441,362.00

Current value of the portion you own?
\$441,362.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here

\$441,362.00**Part 2:** Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
- ☒ Yes

Debtor **McGhee, Melissa Diane**Case number (if known) **24-11288**3.1 Make: Mitsubishi Who has an interest in the property? Check one.**Outlander SE Black
Edition Sport Utility**Model: 4DYear: 2023Approximate mileage: 19036.00

Other information:

Source of Value: KBB
VIN: JA4J3UA83PZ047434

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?
\$25,104.00

Current value of the portion you own?
\$25,104.00

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

4.1 Make: _____ Who has an interest in the property? Check one.

Model: _____

Year: _____

Other information:

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

Current value of the portion you own?

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here ➔

\$25,104.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
☒ Yes. Describe.

Sofa, two recliners, one entertainment center, one dining table with four chairs, one clock, two chest of drawers, two night stands, two desks, two filing cabinets, two side tables, three bookshelves, three lamps, three beds, three dressers, two chairs, and miscellaneous kitchenware (No item is valued in excess of \$1,000.00 each)

\$2,300.00

Debtor **McGhee, Melissa Diane**Case number (if known) **24-11288****7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. Describe.**Three TVs, one cell phone, one laptop, and two tablets (No item is valued in excess of \$1,000.00 each)****\$1,800.00****8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe.**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe.**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☒ No☐ Yes. Describe.**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe.**All clothing (No item is valued in excess of \$1,000.00 each)****\$100.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe.**All miscellaneous costume jewelry (No item is valued in excess of \$1,000.00 each)****\$100.00****13. Non-farm animals***Examples:* Dogs, cats, birds, horses☒ No☐ Yes. Describe.

Debtor **McGhee, Melissa Diane**Case number (if known) **24-11288**

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No☐ Yes. Give specific information.

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

**\$4,300.00****Part 4:** Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☒ No☐ Yes Cash:

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes

Institution name:

PNC Bank

17.1. Checking account:

Account Number: XXXX3054**\$422.90****PNC Bank**

17.2. Checking account:

Account Number: XXXX5574**\$50.62****PNC Bank**

17.3. Savings account:

Account Number: XXXX2625**\$2.00**

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts☒ No☐ Yes Institution or issuer name:

Debtor **McGhee, Melissa Diane**Case number (if known) **24-11288****19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**☒ No☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No☐ Yes. Give specific information about them.....

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No☐ Yes. List each account separately.

Type of account:

Institution name:

401(k) or similar plan:

Pension plan:

IRA:

Retirement account:

Keogh:

Additional account:

Additional account:

Debtor **McGhee, Melissa Diane**Case number (if known) **24-11288****22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☒ No☐ Yes

Institution name or individual:

Electric: _____

Gas: _____

Heating oil: _____

Security deposit on rental unit: _____

Prepaid rent: _____

Telephone: _____

Water: _____

Rented furniture: _____

Other: _____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes

Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit☒ No☐ Yes. Give specific information about them. ...

Debtor **McGhee, Melissa Diane**Case number (if known) **24-11288****26. Patents, copyrights, trademarks, trade secrets, and other intellectual property***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☒ No☐ Yes. Give specific information about them. ...**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☒ No☐ Yes. Give specific information about them. ...**Money or property owed to you?****Current value of the portion you own?**
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal: _____

State: _____

Local: _____

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information.

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information.

Debtor **McGhee, Melissa Diane**Case number (if known) **24-11288****31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☒ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

Term Life Insurance**Keri Cassel and Ferdie Cassel****\$0.00****32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☐ No☒ Yes. Describe each claim.**Debtor may sue insurance company who did not cover house fire. She hired the Steam Team for the repairs but insurance refused to cover the bill.****unknown****34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim.**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information.**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here****\$475.52****Part 5:** Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.**Current value of the portion you own?**
Do not deduct secured claims or exemptions.**38. Accounts receivable or commissions you already earned**☒ No☐ Yes. Describe.

Debtor **McGhee, Melissa Diane**Case number (if known) **24-11288****39. Office equipment, furnishings, and supplies***Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices☒ No☐ Yes. Describe.**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☒ No☐ Yes. Describe.**41. Inventory**☒ No☐ Yes. Describe.**42. Interests in partnerships or joint ventures**☒ No☐ Yes. Describe

Name of entity:

% of ownership:

43. Customer lists, mailing lists, or other compilations☒ No☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?☐ No☐ Yes. Describe.**44. Any business-related property you did not already list**☒ No☐ Yes. Give specific information

Debtor **McGhee, Melissa Diane**

Case number (if known) **24-11288**

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$0.00

Part 6:

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. **Farm animals**

Examples: Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes

48. **Crops—either growing or harvested**

- ☒ No
☐ Yes. Give specific information.

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No
☐ Yes

50. **Farm and fishing supplies, chemicals, and feed**

- ☒ No
☐ Yes

51. **Any farm- and commercial fishing-related property you did not already list**

- ☒ No
☐ Yes. Give specific information.

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here →

\$0.00

Part 7:

Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

Debtor **McGhee, Melissa Diane**

Case number (if known) **24-11288**

☒ No

☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here →

\$0.00

Part 8: List the Totals of Each Part of this Form

55. **Part 1: Total real estate, line 2** →

\$441,362.00

56. **Part 2: Total vehicles, line 5** \$25,104.00

57. **Part 3: Total personal and household items, line 15** \$4,300.00

58. **Part 4: Total financial assets, line 36** \$475.52

59. **Part 5: Total business-related property, line 45** \$0.00

60. **Part 6: Total farm- and fishing-related property, line 52** \$0.00

61. **Part 7: Total other property not listed, line 54** + \$0.00

62. **Total personal property.** Add lines 56 through 61.

\$29,879.52

Copy personal property total →

+ \$29,879.52

63. **Total of all property on Schedule A/B.** Add line 55 + line 62.

\$471,241.52

Fill in this information to identify your case:

Debtor 1	Melissa	Diane	McGhee
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Western		District of Texas
Case number (if known)	24-11288		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: 20965 Mandrake Dr Pflugerville, TX 78660	\$441,362.00	<input checked="" type="checkbox"/> \$307,342.00	Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002
Line from <i>Schedule A/B</i> : 1.1		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☐ No
- ☒ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☒ No
- ☐ Yes

Debtor 1

Melissa

Diane

McGhee

Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Sofa, two recliners, one entertainment center, one dining table with four chairs, one clock, two chest of drawers, two night stands, two desks, two filing cabinets, two side tables, three bookshelves, three lamps, three beds, three dressers, two chairs, and miscellaneous kitchenware (No item is valued in excess of \$1,000.00 each)	\$2,300.00	<input checked="" type="checkbox"/> \$2,300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from Schedule A/B: 6			
Brief description: Three TVs, one cell phone, one laptop, and two tablets (No item is valued in excess of \$1,000.00 each)	\$1,800.00	<input checked="" type="checkbox"/> \$1,800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)
Line from Schedule A/B: 7			
Brief description: All clothing (No item is valued in excess of \$1,000.00 each)	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)
Line from Schedule A/B: 11			
Brief description: All miscellaneous costume jewelry (No item is valued in excess of \$1,000.00 each)	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)
Line from Schedule A/B: 12			

Debtor 1 Melissa Diane McGhee Case number (if known) 24-11288
 First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: <u>Debtor may sue insurance company who did not cover house fire. She hired the Steam Team for the repairs but insurance refused to cover the bill.</u>	<u>unknown</u>	<input checked="" type="checkbox"/> <u>unknown</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-.002</u>
Line from <i>Schedule A/B</i> : <u>33</u>			

Fill in this information to identify your case:

Debtor 1 Melissa Diane McGhee
 First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Western District of Texas

Case number (if 24-11288
 known) _____

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
---	--	---

2.1	PHH Mortgage Services	Describe the property that secures the claim:	\$134,020.00	\$441,362.00	\$0.00
Creditor's Name Attn: Bankruptcy Attn: Bankruptcy 1 Mortgage Way , Mailstop Llc Number Street Mount Laurel, NJ 08054 City State ZIP Code		20965 Mandrake Dr Pflugerville, TX 78660 As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____			
Date debt was incurred <u>10/4/2005</u> Last 4 digits of account number <u>8</u> <u>5</u> <u>5</u> <u>2</u>					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$134,020.00

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 1:		Column A	Column B	Column C
Additional Page		Amount of claim	Value of collateral that supports this claim	Unsecured portion
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Do not deduct the value of collateral.		If any
2.2	Regional Acceptance Co Creditor's Name Attn: Bankruptcy 1424 E Firetower Rd Number Street Greenville, SC 27858 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred 6/1/2023 Last 4 digits of account number 2 6 3 5	Describe the property that secures the claim: \$34,134.00 2023 Mitsubishi Outlander SE Black Edition Sport Utility 4D As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	\$25,104.00	\$9,030.00
Add the dollar value of your entries in Column A on this page. Write that number here:		\$34,134.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$168,154.00		

Fill in this information to identify your case:

Debtor 1	<u>Melissa</u>	<u>Diane</u>	<u>McGhee</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western</u>		District of <u>Texas</u>
Case number (if known)	<u>24-11288</u>		

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

<p>4.1 <u>Affirm, Inc.</u></p> <p>Nonpriority Creditor's Name</p> <p><u>Attn: Bankruptcy</u></p> <p><u>30 Isabella St 4th Floor</u></p> <p>Number Street</p> <p><u>Pittsburgh, PA 15212</u></p> <p>City State ZIP Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2 8 1 5</u></p> <p>When was the debt incurred? <u>12/1/2022</u></p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u></p>	<p><u>\$768.00</u></p>
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Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.2	Affirm, Inc.	Last 4 digits of account number	A I M O	\$360.00
	Nonpriority Creditor's Name	When was the debt incurred? 12/1/2022		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Pittsburgh, PA 15212			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify Unsecured		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

4.3	Affirm, Inc.	Last 4 digits of account number	V R T Z	\$207.00
	Nonpriority Creditor's Name	When was the debt incurred? 6/1/2022		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Pittsburgh, PA 15212			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify Unsecured		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.4	Affirm, Inc.	Last 4 digits of account number	<u>A</u> <u>F</u> <u>S</u> <u>N</u>	\$195.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>11/1/2022</u>		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent		
	Pittsburgh, PA 15212	<input type="checkbox"/> Unliquidated		
	City State ZIP Code	<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
4.5	Affirm, Inc.	Last 4 digits of account number	<u>P</u> <u>A</u> <u>C</u> <u>R</u>	\$145.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>11/1/2022</u>		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent		
	Pittsburgh, PA 15212	<input type="checkbox"/> Unliquidated		
	City State ZIP Code	<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.6	Affirm, Inc.	Last 4 digits of account number	<u>X</u> <u>0</u> <u>L</u> <u>P</u>	\$130.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>11/1/2022</u>		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Pittsburgh, PA 15212			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

4.7	Affirm, Inc.	Last 4 digits of account number	<u>0</u> <u>A</u> <u>0</u> <u>Q</u>	\$119.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>11/1/2022</u>		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Pittsburgh, PA 15212			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.8	Affirm, Inc. Nonpriority Creditor's Name Attn: Bankruptcy 30 Isabella St 4th Floor Number Street Pittsburgh, PA 15212 City State ZIP Code	Last 4 digits of account number <u>Q K I S</u> When was the debt incurred? <u>7/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>	\$118.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.9	Affirm, Inc. Nonpriority Creditor's Name Attn: Bankruptcy 30 Isabella St 4th Floor Number Street Pittsburgh, PA 15212 City State ZIP Code	Last 4 digits of account number <u>8 L A E</u> When was the debt incurred? <u>11/1/2022</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>	\$110.00
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.10	Affirm, Inc.	Last 4 digits of account number <u>W N W 7</u>	\$105.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**30 Isabella St 4th Floor**

Number Street

Pittsburgh, PA 15212

City State ZIP Code

When was the debt incurred?

12/1/2022

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Unsecured

Is the claim subject to offset?

☒ No☐ Yes

4.11	Affirm, Inc.	Last 4 digits of account number <u>J K Y O</u>	\$104.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**30 Isabella St 4th Floor**

Number Street

Pittsburgh, PA 15212

City State ZIP Code

When was the debt incurred?

11/1/2022

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Unsecured

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.12	Affirm, Inc.	Last 4 digits of account number	<u>1 4 T 0</u>	\$96.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>11/1/2022</u>		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Pittsburgh, PA 15212			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
4.13	Affirm, Inc.	Last 4 digits of account number	<u>1 S S A</u>	\$87.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>11/1/2022</u>		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Pittsburgh, PA 15212			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.14	Affirm, Inc.	Last 4 digits of account number	<u>1 E 4 K</u>	\$73.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>7/1/2022</u>		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Pittsburgh, PA 15212			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
4.15	Affirm, Inc.	Last 4 digits of account number	<u>8 X I Z</u>	\$62.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>6/1/2022</u>		
	Attn: Bankruptcy			
	30 Isabella St 4th Floor	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Pittsburgh, PA 15212			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.16	Affirm, Inc.	Last 4 digits of account number G H 8 C	\$53.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**30 Isabella St 4th Floor**

Number Street

Pittsburgh, PA 15212

City State ZIP Code

When was the debt incurred?

9/1/2022

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Unsecured**

Is the claim subject to offset?

☒ No☐ Yes

4.17	Affirm, Inc.	Last 4 digits of account number C Q S P	\$0.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**30 Isabella St 4th Floor**

Number Street

Pittsburgh, PA 15212

City State ZIP Code

When was the debt incurred?

12/1/2021

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **Unsecured**

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.18	Capital One	Last 4 digits of account number <u>7 7 4 0</u>	\$616.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 30285**

Number Street

Salt Lake City, UT 84130-0285

City State ZIP Code

When was the debt incurred?

5/1/2022

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No☐ Yes

4.19	Capital One	Last 4 digits of account number <u>7 3 6 8</u>	\$408.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 30285**

Number Street

Salt Lake City, UT 84130-0285

City State ZIP Code

When was the debt incurred?

6/1/2021

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.20	Comenity Bank/Catherines	Last 4 digits of account number 1 0 9 8	\$0.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 182125**

Number Street

Columbus, OH 43218

City State ZIP Code

When was the debt incurred?

11/25/2021

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **ChargeAccount**

Is the claim subject to offset?

☒ No☐ Yes

4.21	Comenity Bank/Kingsize	Last 4 digits of account number 1 9 2 3	\$0.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 182125**

Number Street

Columbus, OH 43218

City State ZIP Code

When was the debt incurred?

6/17/2016

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **ChargeAccount**

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.22	Comenity Bank/Roaman's	Last 4 digits of account number <u>2 2 7 1</u>	\$0.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 182125**

Number Street

Columbus, OH 43218

City State ZIP Code

When was the debt incurred?

3/22/2017

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify ChargeAccount

Is the claim subject to offset?

☒ No☐ Yes

4.23	Comenity Bank/Torrid	Last 4 digits of account number <u>1 2 9 6</u>	\$220.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 182125**

Number Street

Columbus, OH 43218

City State ZIP Code

When was the debt incurred?

11/16/2022

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify ChargeAccount

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.24	Comenity Bank/Victoria Secret	Last 4 digits of account number 8 0 3 8	\$0.00
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Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred?

10/29/2021**PO Box Box 182125**

As of the date you file, the claim is: Check all that apply.

Number

Street

☐ Contingent**Jeffersonville, OH 43128**☐ Unliquidated

City

State

ZIP Code

☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **ChargeAccount**

Is the claim subject to offset?

☒ No☐ Yes

4.25	Comenity Capital/petco	Last 4 digits of account number 2 9 4 9	\$0.00
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Nonpriority Creditor's Name

Attn: Bankruptcy

When was the debt incurred?

9/19/2022**PO Box 182125**

As of the date you file, the claim is: Check all that apply.

Number

Street

☐ Contingent**Columbus, OH 43218**☐ Unliquidated

City

State

ZIP Code

☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **CreditCard**

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.26	Comenitybank/Onetop	Last 4 digits of account number	<u>2 6 6 9</u>	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	<u>7/30/2017</u>	
	Attn: Bankruptcy			
	PO Box 182125	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent		
	Columbus, OH 43218	<input type="checkbox"/> Unliquidated		
	City State ZIP Code	<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
4.27	Credit One Bank	Last 4 digits of account number	<u>1 7 0 7</u>	\$580.00
	Nonpriority Creditor's Name	When was the debt incurred?	<u>8/1/2021</u>	
	PO Box 98873			
	Number Street	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent		
	Las Vegas, NV 89193-8873	<input type="checkbox"/> Unliquidated		
	City State ZIP Code	<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.28	Credit One Bank	Last 4 digits of account number <u>2 4 7 0</u>	\$349.00
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Nonpriority Creditor's Name

PO Box 98873

Number

Street

When was the debt incurred?

8/1/2022**Las Vegas, NV 89193-8873**

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify CreditCard

Is the claim subject to offset?

☒ No☐ Yes

4.29	Easy Pay/Duvera Collections	Last 4 digits of account number <u>9 2 5 4</u>	\$4,671.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**PO Box 2549**

Number

Street

When was the debt incurred?

4/20/2023**Carlsbad, CA 92018-2549**

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify InstallmentSalesContract

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1 Melissa Diane McGhee Case number (if known) 24-11288
 First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.30	GM Financial	Last 4 digits of account number	<u>6</u> <u>3</u> <u>5</u> <u>6</u>	\$0.00
Nonpriority Creditor's Name		When was the debt incurred?		
Attn: Bankruptcy		<u>12/1/2016</u>		
PO Box 183853		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Arlington, TX 76096		Type of NONPRIORITY unsecured claim:		
City State ZIP Code		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Automobile</u>		
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.31	IC Systems, Inc	Last 4 digits of account number	<u>7</u> <u>5</u> <u>2</u> <u>1</u>	\$957.00
Nonpriority Creditor's Name		When was the debt incurred?		
Attn: Bankruptcy		<u>5/1/2020</u>		
444 Hwy 96 East		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
St. Paul, MN 55127		Type of NONPRIORITY unsecured claim:		
City State ZIP Code		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CollectionAttorney</u>		
Who incurred the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.32	IC Systems, Inc	Last 4 digits of account number	3 0 5 3	\$919.00
Nonpriority Creditor's Name		When was the debt incurred?		
Attn: Bankruptcy		10/1/2021		
444 Hwy 96 East		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent		
St. Paul, MN 55127		<input type="checkbox"/> Unliquidated		
City State ZIP Code		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify CollectionAttorney		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
4.33	IC Systems, Inc	Last 4 digits of account number	5 2 5 3	\$350.00
Nonpriority Creditor's Name		When was the debt incurred?		
Attn: Bankruptcy		2/1/2021		
444 Hwy 96 East		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent		
St. Paul, MN 55127		<input type="checkbox"/> Unliquidated		
City State ZIP Code		<input type="checkbox"/> Disputed		
Who incurred the debt? Check one.		Type of NONPRIORITY unsecured claim:		
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> Student loans		
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other. Specify CollectionAttorney		
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.34	Jefferson Capital Systems, LLC	Last 4 digits of account number 9 0 0 3	\$6,309.00
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Nonpriority Creditor's Name

Attn: Bankruptcy**200 14 Ave. E**

Number Street

Sartell, MN 56377

City State ZIP Code

When was the debt incurred?

12/1/2023

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **FactoringCompanyAccount**

Is the claim subject to offset?

☒ No☐ Yes

4.35	Kikoff	Last 4 digits of account number H S 7 P	\$45.00
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Nonpriority Creditor's Name

75 Broadway

Number Street

San Francisco, CA 94111

City State ZIP Code

When was the debt incurred?

5/1/2023

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify **ChargeAccount**

Is the claim subject to offset?

☒ No☐ Yes

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.36	Midland Credit Mgmt	Last 4 digits of account number	<u>8</u> <u>9</u> <u>1</u> <u>3</u>	\$922.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>3/1/2020</u>		
	Attn: Bankruptcy			
	PO Box 939069	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	San Diego, CA 92193			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>FactoringCompanyAccount</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
4.37	Regional Acceptance Co	Last 4 digits of account number	<u>7</u> <u>2</u> <u>4</u> <u>3</u>	\$18,894.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>5/1/2019</u>		
	Attn: Bankruptcy			
	1424 E Firetower Rd	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Greenville, SC 27858			
	City State ZIP Code			
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Other. Specify _____		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.38	The Bureaus Inc	Last 4 digits of account number	<u>2</u> <u>4</u> <u>9</u> <u>1</u>	\$961.00
	Nonpriority Creditor's Name	When was the debt incurred? <u>6/1/2020</u>		
	Attn: Bankruptcy Attn: Bankruptcy			
	650 Dundee Rd , Ste 370	As of the date you file, the claim is: Check all that apply.		
	Number Street	<input type="checkbox"/> Contingent		
	Northbrook, IL 60062	<input type="checkbox"/> Unliquidated		
	City State ZIP Code	<input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input checked="" type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> At least one of the debtors and another	<input checked="" type="checkbox"/> Other. Specify <u>CollectionAttorney</u>		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
4.39	The Steam Team, Inc.	Last 4 digits of account number	<u>X</u> <u>X</u> <u>X</u> <u>X</u>	\$44,911.26
	Nonpriority Creditor's Name	When was the debt incurred? _____		
	1904 West Koenig Ln			
	Number Street	As of the date you file, the claim is: Check all that apply.		
	Austin, TX 78756	<input type="checkbox"/> Contingent		
	City State ZIP Code	<input type="checkbox"/> Unliquidated		
	Who incurred the debt? Check one.	<input type="checkbox"/> Disputed		
	<input checked="" type="checkbox"/> Debtor 1 only	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Student loans		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts		
	<input type="checkbox"/> Check if this claim is for a community debt	<input checked="" type="checkbox"/> Other. Specify <u>Lawsuit</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			

Debtor 1 Melissa Diane McGhee Case number (if known) 24-11288
First Name Middle Name Last Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

<div>1. <u>Beatty Navarre Strama PC</u></div> <div>Name</div> <div><u>Attn: Ryan D. Delgado</u></div> <div><u>901 South Mopac Expressway Building 1, Suite 200</u></div> <div>Number Street</div> <div><u>Austin, TX 78746</u></div> <div>City State ZIP Code</div>	<div>On which entry in Part 1 or Part 2 did you list the original creditor?</div> <div>Line <u>4.39</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims</div> <div> <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims</div> <div>Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u></div>
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Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6e. <u>\$0.00</u>
		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$83,844.26</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$83,844.26</u>

Fill in this information to identify your case:

Debtor 1	<u>Melissa</u>	<u>Diane</u>	<u>McGhee</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u>24-11288</u>		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<div> <div>Name</div> <div> <div>Number</div> <div>Street</div> </div> <div> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div>	
2.2	<div> <div>Name</div> <div> <div>Number</div> <div>Street</div> </div> <div> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div>	
2.3	<div> <div>Name</div> <div> <div>Number</div> <div>Street</div> </div> <div> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div>	
2.4	<div> <div>Name</div> <div> <div>Number</div> <div>Street</div> </div> <div> <div>City</div> <div>State</div> <div>ZIP Code</div> </div> </div>	

Fill in this information to identify your case:

Debtor 1	Melissa	Diane	McGhee
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Western		District of Texas
Case number	24-11288		
(if known)			

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☒ No
☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? _____. Fill in the name and current address of that person.

 Name of your spouse, former spouse, or legal equivalent

 Number Street

 City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

 Name

 Number Street

 City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.2

 Name

 Number Street

 City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

Fill in this information to identify your case:

Debtor 1	<u>Melissa</u>	<u>Diane</u>	<u>McGhee</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u>24-11288</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there? 1 year

Debtor 1

Debtor 2 or non-filing spouse

☒ Employed ☐ Not Employed☐ Employed ☐ Not EmployedInsurance Agent (remote)eHealthInsurance Services, Inc.9190 Priority Way W Dr Ste 110

Number Street

Number Street

46420

City

State

Zip Code

City

State

Zip Code

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

2.

\$3,172.74\$0.00

3. Estimate and list monthly overtime pay.

3.

+ \$0.00+ \$0.00

4. Calculate gross income. Add line 2 + line 3.

4.

\$3,172.74\$0.00

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....→	4.	\$3,172.74	\$0.00
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$241.24	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$158.64	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00
5e. Insurance	5e.	\$184.38	\$0.00
5f. Domestic support obligations	5f.	\$0.00	\$0.00
5g. Union dues	5g.	\$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$584.26	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,588.47	\$0.00
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00
8b. Interest and dividends	8b.	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00
8d. Unemployment compensation	8d.	\$0.00	\$0.00
8e. Social Security	8e.	\$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	\$0.00
8g. Pension or retirement income	8g.	\$0.00	\$0.00
8h. Other monthly income. Specify: _____	8h. +	\$0.00	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$2,588.47	\$0.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +		\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12.		\$2,588.47
Combined monthly income			
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No.			
<input type="checkbox"/> Yes. Explain:			

Fill in this information to identify your case:

Debtor 1	<u>Melissa</u>	<u>Diane</u>	<u>McGhee</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u>24-11288</u>		

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☒ No
- ☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$1,217.29

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. \$0.00

4b. \$0.00

4c. \$100.00

4d. \$125.00

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

		Your expenses
5.	Additional mortgage payments for your residence , such as home equity loans	5. <u>\$0.00</u>
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. <u>\$400.00</u>
6b.	Water, sewer, garbage collection	6b. <u>\$150.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. <u>\$400.00</u>
6d.	Other. Specify: _____	6d. <u>\$0.00</u>
7.	Food and housekeeping supplies	7. <u>\$400.00</u>
8.	Childcare and children's education costs	8. <u>\$0.00</u>
9.	Clothing, laundry, and dry cleaning	9. <u>\$150.00</u>
10.	Personal care products and services	10. <u>\$150.00</u>
11.	Medical and dental expenses	11. <u>\$0.00</u>
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. <u>\$175.00</u>
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. <u>\$0.00</u>
14.	Charitable contributions and religious donations	14. <u>\$0.00</u>
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. <u>\$0.00</u>
15b.	Health insurance	15b. <u>\$0.00</u>
15c.	Vehicle insurance	15c. <u>\$265.00</u>
15d.	Other insurance. Specify: _____	15d. <u>\$0.00</u>
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. <u>\$150.00</u>
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1 <u>2023 Mitsubishi Outlander SE Black Edition Sport Utility 4D</u>	17a. <u>\$792.00</u>
17b.	Car payments for Vehicle 2	17b. <u>\$0.00</u>
17c.	Other. Specify: <u>Tolls</u>	17c. <u>\$75.00</u>
17d.	Other. Specify: _____	17d. <u>\$0.00</u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. <u>\$0.00</u>
19.	Other payments you make to support others who do not live with you. Specify: _____	19. <u>\$0.00</u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a.	Mortgages on other property	20a. <u>\$0.00</u>
20b.	Real estate taxes	20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e. <u>\$0.00</u>

Debtor 1 **Melissa** **Diane** **McGhee**
 First Name Middle Name Last Name

Case number (if known) **24-11288**

21. **Other.** Specify: _____

21. + \$0.00

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$4,549.29

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$4,549.29

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. \$2,588.47

23b. Copy your monthly expenses from line 22c above.

23b. - \$4,549.29

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. (\$1,960.82)

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.
☐ Yes.

None

Fill in this information to identify your case:

Debtor 1	<u> Melissa </u>	<u> Diane </u>	<u> McGhee </u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u> </u>	<u> </u>	<u> </u>
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u> Western District of Texas </u>		
Case number (if known)	<u> 24-11288 </u>		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

Part 1: Summarize Your Assets

1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	<u> \$441,362.00 </u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	<u> \$29,879.52 </u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	<u> \$471,241.52 </u>

Your assets

Value of what you own

Part 2: Summarize Your Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i>	<u> \$168,154.00 </u>
---	-----------------------------

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	<u> \$0.00 </u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	<u> \$83,844.26 </u>

Your total liabilities

 \$251,998.26

Your liabilities

Amount you owe

Part 3: Summarize Your Income and Expenses

4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i>	<u> \$2,588.47 </u>
---	---------------------------

5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i>	<u> \$4,549.29 </u>
---	---------------------------

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.**\$3,714.90****9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:****Total claim****From Part 4 on Schedule E/F, copy the following:**9a. Domestic support obligations (Copy line 6a.) **\$0.00**9b. Taxes and certain other debts you owe the government. (Copy line 6b.) **\$0.00**9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) **\$0.00**9d. Student loans. (Copy line 6f.) **\$0.00**9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) **\$0.00**9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) **+ \$0.00**9g. **Total.** Add lines 9a through 9f. **\$0.00**

Fill in this information to identify your case:

Debtor 1	<u>Melissa</u>	<u>Diane</u>	<u>McGhee</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u>24-11288</u>		

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

- ☒ No
- ☐ Yes. Name of person _____ Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Melissa Diane McGhee
Melissa Diane McGhee, Debtor 1

Date 10/24/2024
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Melissa</u>	<u>Diane</u>	<u>McGhee</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u>24-11288</u>		

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☐ Married
- ☒ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
- ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
<input type="checkbox"/> Same as Debtor 1		<input type="checkbox"/> Same as Debtor 1	
Number Street _____ _____ City State ZIP Code	From _____ To _____	Number Street _____ _____ City State ZIP Code	From _____ To _____
<input type="checkbox"/> Same as Debtor 1		<input type="checkbox"/> Same as Debtor 1	
Number Street _____ _____ City State ZIP Code	From _____ To _____	Number Street _____ _____ City State ZIP Code	From _____ To _____

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
- ☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Debtor 1 Melissa Diane McGhee Case number (if known) 24-11288

First Name Middle Name Last Name

Part 2: Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<u>\$54,849.51</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For last calendar year: (January 1 to December 31, <u>2023</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<u>\$30,377.00</u>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, <u>2022</u>) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business		<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.☒ No☐ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:				
For last calendar year: (January 1 to December 31, <u>2023</u>) YYYY				
For the calendar year before that: (January 1 to December 31, <u>2022</u>) YYYY				

Debtor 1 **Melissa Diane McGhee** Case number (if known) **24-11288**

First Name Middle Name Last Name

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

- ☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name				<input type="checkbox"/> Mortgage
Number Street				<input type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
City State ZIP Code				<input type="checkbox"/> Other _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- ☒ No

- ☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				
Number Street				
City State ZIP Code				

Debtor 1

Melissa**Diane****McGhee**Case number (if known) **24-11288**

First Name

Middle Name

Last Name

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

☒ No☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name				
Number Street				
City State ZIP Code				

Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No☒ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title The Steam Team, Inc. vs Melissa McGhee	Contract Consumer/Commercial Debt	In the County Court of Travis County, Texas	<input type="checkbox"/> Pending
Case number C-1-CV-22-00039		Court Name Attn: Clerk of Court	<input type="checkbox"/> On appeal
		PO Box Box 1748	<input checked="" type="checkbox"/> Concluded
		Number Street Austin, TX 78767	
		City State ZIP Code	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☒ No. Go to line 11.☐ Yes. Fill in the information below.

Debtor 1	Melissa	Diane	McGhee	Case number (if known) 24-11288
	<small>First Name</small>	<small>Middle Name</small>	<small>Last Name</small>	

<div style="border-bottom: 1px solid black; margin-bottom: 10px;">Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div> <div style="display: flex; justify-content: space-between;"> City State ZIP Code </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #cccccc;"> <th style="width: 70%;">Describe the property</th> <th style="width: 15%;">Date</th> <th style="width: 15%;">Value of the property</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> <td></td> <td></td> </tr> </tbody> </table> <div style="background-color: #cccccc; padding: 5px; margin-top: 5px;">Explain what happened</div> <div style="margin-top: 5px;"> <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied. </div>	Describe the property	Date	Value of the property			
Describe the property	Date	Value of the property					

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
- ☐ Yes. Fill in the details.

<div style="border-bottom: 1px solid black; margin-bottom: 10px;">Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 10px;"></div> <div style="display: flex; justify-content: space-between;"> City State ZIP Code </div>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #cccccc;"> <th style="width: 65%;">Describe the action the creditor took</th> <th style="width: 20%;">Date action was taken</th> <th style="width: 15%;">Amount</th> </tr> </thead> <tbody> <tr> <td style="height: 60px;"></td> <td></td> <td></td> </tr> </tbody> </table>	Describe the action the creditor took	Date action was taken	Amount			
Describe the action the creditor took	Date action was taken	Amount					

Last 4 digits of account number: XXXX- _ _ _ _

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No
- ☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
- ☐ Yes. Fill in the details for each gift.

Debtor 1 **Melissa** **Diane** **McGhee** Case number (if known) **24-11288**
 First Name Middle Name Last Name

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No
- ☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name Number Street City State ZIP Code			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
- ☐ Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost

Debtor 1 Melissa Diane McGhee Case number (if known) 24-11288

First Name Middle Name Last Name

Part 7: List Certain Payments or Transfers**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No☒ Yes. Fill in the details.**Resolve Law Group**

Person Who Was Paid

801 Travis Street Suite 2101

Number Street

Houston, TX 77002

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred

Date payment or
transfer was made

Amount of payment

Filing Fee; Credit Report9/27/2024\$338.0009/27/2024\$25.00**Allen Credit & Debt Counseling Agency**

Person Who Was Paid

800 Dakota Ave N

Number Street

Huron, SD 57350

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred

Date payment or
transfer was made

Amount of payment

Credit Counseling Course09/05/2024\$25.00**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

☒ No☐ Yes. Fill in the details.

Description and value of any property transferred

Date payment or
transfer was made

Amount of payment

Person Who Was Paid

Number Street

City State ZIP Code

Debtor 1 **Melissa** **Diane** **McGhee** Case number (if known) **24-11288**
 First Name Middle Name Last Name

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.



No

☐ Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer			
Number Street			
City State ZIP Code			
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary?
 (These are often called *asset-protection devices*.)



No

☐ Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust		

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.



No

☐ Yes. Fill in the details.

Debtor 1	Melissa	Diane	McGhee	Case number (if known) 24-11288
	First Name	Middle Name	Last Name	

<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name of Financial Institution</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City</div> <div style="display: flex; justify-content: space-between;"> State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">XXXX- </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> Checking </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> Savings </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> Money market </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> Brokerage </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> Other </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Date account was closed, sold, moved, or transferred</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Last balance before closing or transfer</div>
---	--	---	--

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
- ☐ Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name of Financial Institution</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City</div> <div style="display: flex; justify-content: space-between;"> State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City</div> <div style="display: flex; justify-content: space-between;"> State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> No </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> Yes </div>

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
- ☐ Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name of Storage Facility</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City</div> <div style="display: flex; justify-content: space-between;"> State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">City</div> <div style="display: flex; justify-content: space-between;"> State ZIP Code </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> No </div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;"> <input type="checkbox"/> Yes </div>

Debtor 1 **Melissa Diane McGhee** Case number (if known) **24-11288**

First Name Middle Name Last Name

Part 9: Identify Property You Hold or Control for Someone Else**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**☒ No☐ Yes. Fill in the details.

Where is the property?		Describe the property	Value
Owner's Name	Number Street		
Number Street			
City State ZIP Code			
City State ZIP Code			

Part 10: Give Details About Environmental Information**For the purpose of Part 10, the following definitions apply:**

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**☒ No☐ Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
Name of site		
Governmental unit		
Number Street		
City State ZIP Code		
City State ZIP Code		

25. Have you notified any governmental unit of any release of hazardous material?☒ No☐ Yes. Fill in the details.

Debtor 1 **Melissa** **Diane** **McGhee** Case number (if known) **24-11288**
 First Name Middle Name Last Name

Governmental unit		Environmental law, if you know it	Date of notice
Name of site			
Governmental unit			
Number	Street		
City State ZIP Code			
City State ZIP Code			

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
- ☐ Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Court Name		
Number Street		
Case number		
City State ZIP Code		

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation
- ☒ No. None of the above applies. Go to Part 12.
- ☐ Yes. Check all that apply above and fill in the details below for each business.

Name	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		EIN: _____
Number Street	Name of accountant or bookkeeper	Dates business existed
		From _____ To _____
City State ZIP Code		

Debtor 1 Melissa Diane McGhee Case number (if known) 24-11288

First Name Middle Name Last Name

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.



No



Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City

State

ZIP Code

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X

/s/ Melissa Diane McGhee

Signature of Melissa Diane McGhee, Debtor 1

Date 10/24/2024

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?



No



Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?



No



Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	Melissa	Diane	McGhee
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Western District of Texas		
Case number (if known)	24-11288		

☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: PHH Mortgage Services	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: 20965 Mandrake Dr Pflugerville, TX 78660	<input type="checkbox"/> Retain the property and redeem it.	<input checked="" type="checkbox"/> Yes
	<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input checked="" type="checkbox"/> Retain the property and [explain]: Retain and Pay	
Creditor's name: Regional Acceptance Co	<input type="checkbox"/> Surrender the property.	<input checked="" type="checkbox"/> No
Description of property securing debt: 2023 Mitsubishi Outlander SE Black Edition Sport Utility 4D	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
	<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input checked="" type="checkbox"/> Retain the property and [explain]: Retain and Pay	

Debtor 1 **Melissa** **Diane** **McGhee**
 First Name Middle Name Last Name

Case number (if known) **24-11288**

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: <hr/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property: <hr/>	
Lessor's name: <hr/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property: <hr/>	
Lessor's name: <hr/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property: <hr/>	
Lessor's name: <hr/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property: <hr/>	
Lessor's name: <hr/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property: <hr/>	
Lessor's name: <hr/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property: <hr/>	
Lessor's name: <hr/>	<input type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property: <hr/>	

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Melissa Diane McGhee
 Signature of Debtor 1

Date 10/24/2024
 MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Melissa</u>	<u>Diane</u>	<u>McGhee</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Texas</u>		
Case number (if known)	<u>24-11288</u>		

Check one box only as directed in this form and in Form 122A-1Supp:

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☒ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Column A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse												
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	<u>\$3,714.90</u>	_____												
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	<u>\$0.00</u>	_____												
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	<u>\$0.00</u>	_____												
5. Net income from operating a business, profession, or farm	<table border="0"> <tr> <td></td> <td>Debtor 1</td> <td>Debtor 2</td> </tr> <tr> <td>Gross receipts (before all deductions)</td> <td><u>\$0.00</u></td> <td>_____</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>- <u>\$0.00</u></td> <td>- _____</td> </tr> <tr> <td>Net monthly income from a business, profession, or farm</td> <td><u>\$0.00</u></td> <td>_____</td> </tr> </table>		Debtor 1	Debtor 2	Gross receipts (before all deductions)	<u>\$0.00</u>	_____	Ordinary and necessary operating expenses	- <u>\$0.00</u>	- _____	Net monthly income from a business, profession, or farm	<u>\$0.00</u>	_____	<div>Copy here →</div> <u>\$0.00</u>
	Debtor 1	Debtor 2												
Gross receipts (before all deductions)	<u>\$0.00</u>	_____												
Ordinary and necessary operating expenses	- <u>\$0.00</u>	- _____												
Net monthly income from a business, profession, or farm	<u>\$0.00</u>	_____												
6. Net income from rental and other real property	<table border="0"> <tr> <td></td> <td>Debtor 1</td> <td>Debtor 2</td> </tr> <tr> <td>Gross receipts (before all deductions)</td> <td><u>\$0.00</u></td> <td>_____</td> </tr> <tr> <td>Ordinary and necessary operating expenses</td> <td>- <u>\$0.00</u></td> <td>- _____</td> </tr> <tr> <td>Net monthly income from rental or other real property</td> <td><u>\$0.00</u></td> <td>_____</td> </tr> </table>		Debtor 1	Debtor 2	Gross receipts (before all deductions)	<u>\$0.00</u>	_____	Ordinary and necessary operating expenses	- <u>\$0.00</u>	- _____	Net monthly income from rental or other real property	<u>\$0.00</u>	_____	<div>Copy here →</div> <u>\$0.00</u>
	Debtor 1	Debtor 2												
Gross receipts (before all deductions)	<u>\$0.00</u>	_____												
Ordinary and necessary operating expenses	- <u>\$0.00</u>	- _____												
Net monthly income from rental or other real property	<u>\$0.00</u>	_____												
7. Interest, dividends, and royalties	<u>\$0.00</u>	_____												

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
8. Unemployment compensation		
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ↓		
For you.....	\$0.00	
For your spouse.....		
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$0.00	
10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.		
Total amounts from separate pages, if any.	+	+
11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$3,714.90	+
		= \$3,714.90
		Total current monthly income

Part 2: Determine Whether the Means Test Applies to You

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11..... Copy line 11 here → \$3,714.90

Multiply by 12 (the number of months in a year).

X 12

12b. The result is your annual income for this part of the form. 12b. \$44,578.80

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live. Texas

Fill in the number of people in your household. 1

Fill in the median family income for your state and size of household..... 13. \$61,460.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2.

14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X

/s/ Melissa Diane McGhee

Signature of Debtor 1

Date

10/24/2024

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A–2.

If you checked line 14b, fill out Form 122A–2 and file it with this form.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Western District of Texas

In re McGhee, Melissa Diane

Case No. 24-11288

Debtor

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$2,376.00

Prior to the filing of this statement I have received \$0.00

Balance Due \$2,376.00

2. \$338.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

4. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

5. ☐ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☒ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

In return for the above-disclosed post petition fee, Attorney has agreed to render legal service for all aspects of the bankruptcy case, including: Informing Client of Client's rights and responsibilities under the Bankruptcy Laws; (b) providing consultation to enable the Client to make an informed decision about continuing in a Chapter 7; (c) advising Client of all available exemptions; (d) assisting the Client in complying with all of the requirements imposed by the Bankruptcy Laws and Rules; (e) sending any required post-filing correspondence; (f) calculating current monthly income to determine if any presumption of abuse would arise under the Bankruptcy Code; (g) preparation and filing of the Chapter 7 Schedules and other documents needed to have a complete bankruptcy filing according to the Bankruptcy Code and Local Rules; (h) file any suggestion of bankruptcy as required; (i) negotiate with the Trustee on any issues stemming from valuation of debtor's assets; (j) review the debtor's credit report after the discharge and consult with the debtor as to same. The Firm will continue to represent the Client in the case even where the Client chooses not to retain the Firm for postpetition services until the Court enters an order allowing the Firm to withdraw from representation. The debtor has also paid to the Attorney a Court Filing Fee of \$338 and the cost of a credit report of \$25.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

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- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

7. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

By agreement with Client, the above disclosed fee does not include the following services; the contract of employment does not include representing Client, either as a Plaintiff or a Defendant, in any adversary proceeding, filed in or in connection with this case. Should Attorney agree to represent Client in an adversary proceeding, a different contract of employment shall be executed between the parties under such terms and conditions as the parties deem mutually acceptable.

CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.	
<div style="text-align: center;">10/24/2024</div> <hr/> <div style="text-align: center;"><i>Date</i></div>	<div style="text-align: center;">/s/ Stuart M Price</div> <hr/> <div style="text-align: center;">Stuart M Price <i>Signature of Attorney</i></div> <div style="text-align: right; padding-top: 20px;">Bar Number: 3821835 Resolve Law Group 801 Travis Street Suite 2101 Houston, TX 77002 Phone: (737) 707-4217</div> <div style="text-align: center; padding-top: 20px;">Resolve Law Group</div> <hr/> <div style="text-align: center;"><i>Name of law firm</i></div>